

Summary Report

Karen's Care Agency Limited

Home Care Service

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SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. Further information about our findings is contained in the main body of this report.

It was noted at the time of the inspection the key role which the very experienced Registered Manager retains in overseeing all operational matters, but with delegation of duties to a deputy manager also in place. The opportunity for some further refinements to the on-call roster was highlighted as something to be considered with reference to the challenging workload that may otherwise fall primarily onto the Registered Manager. However, this is not a concern as there are clear lines of communication in place, and accountability within defined roles that will operate at any time in the absence of the Registered Manager.

It was recorded on the day of the inspection that a total of 13 care receivers of the 24 receiving support were living with dementia. Importantly, the attention to training and support of staff in promoting the best care interventions for those living with dementia was clearly framed in the training log, with evidence of the supervision of staff in practice.

It was noted from care plans reviewed as to the instructive and helpful information provided that would enable appropriate interventions to be followed in supporting care receivers. There was good evidence of best practice approaches being applied, with care receivers or relatives being directly involved in the planning of their care.

Information provided and evidence as viewed demonstrated a professional approach in promoting safe working practices, with robust administrative policies and procedures in place, including safe recruitment practices. However, it was highlighted that there had been a low volume of notifications received by the Commission. Further analysis was therefore advised to determine whether some incidents i.e., falls or minor injuries that may occur in practice, may have required

routine notification to the Commission. It was apparent that some revision to internal reporting systems was needed. This is an area for improvement.

Positive feedback was received from care receivers and relatives who were contacted for their views about the service. This was reinforced by feedback provided by independent healthcare professionals and employees. This feedback evidenced that the Standards of care were being very well met and promoted by the service.

IMPROVEMENT PLAN

There was one area for improvement identified during this inspection. The table below is the registered Provider's response to the inspection findings.

Area for Improvement 1 Ref: Standard 4.3 & Appendix 7	A review of internal systems for incident reporting must be undertaken to ensure that all notifiable incidents are submitted to the Commission.
	Response by registered provider:
To be completed by: with immediate effect.	Internal systems have been reviewed to further highlight that all incidents subject to evaluation by the management team will be submitted to the Commission if required, and with reference to the relevant Standard and notification channel

The full report can be accessed from here.